

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1/14		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CM	71632	4-8-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	1/12/00
2	✓	✓	1/12/00
3	✓	✓	1/12/00
4	✓	✓	1/12/00
5	✓	✓	1/12/00
6	✓	✓	1/12/00
7	✓	✓	1/12/00
8	✓	✓	1/12/00
9	✓	✓	1/12/00
10	✓	✓	1/12/00
11	✓	✓	1/12/00
12	✓	✓	1/12/00
13	✓	✓	1/12/00
14	✓	✓	1/12/00
15	✓	✓	1/12/00
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25	✓	✓	1/12/00
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45	✓	✓	1/12/00
46	✓	✓	1/12/00
47	✓	✓	1/12/00
48	✓	✓	1/12/00
49	✓	✓	1/12/00
50	✓	✓	1/12/00

Claim	Final	Original	Date
51	✓	✓	1/12/00
52	✓	✓	1/12/00
53	✓	✓	1/12/00
54	-	-	1/12/00
55	✓	✓	1/12/00
56	✓	✓	1/12/00
57	✓	✓	1/12/00
58	✓	✓	1/12/00
59	✓	✓	1/12/00
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here